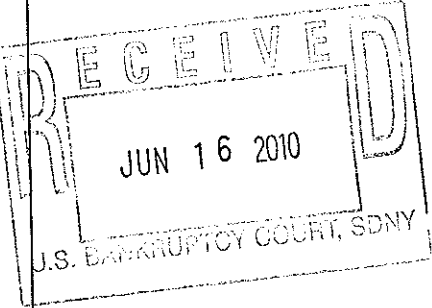


UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK

WITHDRAWAL OF CLAIM

 Debtor Name and Case Number:	<input checked="" type="checkbox"/> Motors Liquidation Company, Case No. 09-50026
	<input type="checkbox"/> MLC of Harlem, Inc., Case No. 09-13558
	<input type="checkbox"/> MLCS, LLC, Case No. 09-50027
	<input type="checkbox"/> MLCS Distribution Corporation, Case No. 09-50028
	<input type="checkbox"/> Remediation and Liability Management Company, Inc., Case No. 09-50029
	<input type="checkbox"/> Environmental Corporate Remediation Company, Inc., Case No. 09-50030
Creditor Name and Address:	ATMOS ENERGY/PIPELINE DIVISION A DIVISION OF ATMOS ENERGY CORP ATTN BANKRUPTCY GROUP PO BOX 650205 DALLAS, TX, 75265-0205
Claim Number (if known):	1191
Date Claim Filed:	7/27/2009
Total Amount of Claim Filed:	\$73,043.67

I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. I hereby withdraw the above-referenced claim and authorize the Clerk of this Court, or their duly appointed Claims Agent, to reflect this withdrawal on the official claims register for the above-referenced Debtor.

Dated: June 10, 2010


Rhonda B. Brown

Print Name: Rhonda B. Brown

Title (if applicable): Bankruptcy Specialist

FORM 10. PROOF OF CLAIM

Form 10-11/92

United States Bankruptcy Court Southern District of New York		Proof of Claim	
In re (Name of Debtor) MOTORS LIQUIDATION COMPANY xx-xxx2515 fka GENERAL MOTORS CORPORATION		Case Number 09-50026	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A "request for payment of an administrative expense" may be filed pursuant to 11 U.S.C. § 503.			
Name of Creditor (The persons or other entity to whom the debtor owes money or property) Atmos Energy/ Mid-Tex Division A division of Atmos Energy Corporation		<input type="checkbox"/> Check box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input checked="" type="checkbox"/> Check box if this address differs from the address on the envelope sent to you by the court.	
Name and Address Where Notices Should be Sent Attn: Bankruptcy Group Atmos Energy Corporation P.O. Box 650205 Dallas, TX 75265-0205 Telephone No. 972-855-3343			
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR		Check here if this claim _____ replaces a previously filed claim, dated _____ _____ amends	
1. BASIS FOR CLAIM <input checked="" type="checkbox"/> Goods Sold - NATURAL GAS FILED - 01190 <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Services Performed MOTORS LIQUIDATION COMPANY <input type="checkbox"/> Wages, salaries, and compensation (Fill out below) <input type="checkbox"/> Money Loaned F/K/A GENERAL MOTORS CORP Your social security number _____ <input type="checkbox"/> Personal Injury/Wrongful Death SDNY # 09-50026 (REG) Unpaid compensation for services performed from _____ to _____ (date) (date) <input type="checkbox"/> Taxes <input type="checkbox"/> Other (Describe briefly)			
2. DATE DEBT WAS INCURRED VARIOUS		3. IF COURT JUDGMENT, DATE OBTAINED	
4. CLASSIFICATION OF CLAIM Under the Bankruptcy code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.			
<input type="checkbox"/> SECURED CLAIM \$ _____ Attach evidence of perfection of security interest. Brief Description of Collateral: _____ <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other (Describe briefly) _____ Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ _____ <input checked="" type="checkbox"/> UNSECURED NONPRIORITY CLAIM \$ 770.45 A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.		<input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ _____ Specify the priority of the claim: <input type="checkbox"/> Wages, salaries, or commissions (up to \$2,000, earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier) - 11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$900 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6) <input type="checkbox"/> Taxes or penalties of governmental units - 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) _____	
5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED \$ <u>770.45</u> (Unsecured) \$ _____ (Secured) \$ _____ (Priority) \$ <u>770.45</u> (TOTAL)			
Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.			
6. CREDITS AND SETOFFS The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant has deducted all amounts that claimant owes to debtor.			
7. SUPPORTING DOCUMENTS Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.			
8. TIME-STAMPED COPY To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.			
Date JULY 27, 2009		Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any).  Rhonda B. Brown, Credit and Collections	

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 142 and 1471.

